



**Testimony of Howard Sovronsky, LCSW
Chief Behavioral Health Officer at Connecticut Children's Medical Center,
to the Children's Committee regarding:
SB 2- An Act Concerning Social Equity and the Health, Safety and Education of Children**

March 8, 2021

Senator Anwar, Representative Linehan, members of the Children's Committee, thank you for the opportunity to share my thoughts regarding Senate Bill 2, *An Act Concerning Social Equity and the Health, Safety and Education of Children*. My name is Howard Sovronsky and I am the Chief Behavioral Health Officer at Connecticut Children's Medical Center. Although this bill covers a broad range of issues impacting the wellbeing of children, I would like to focus my remarks on those provisions related to children's behavioral health.

As the state's only independent hospital focused exclusively on the needs of children, Connecticut Children's often provides care for children with emotional challenges, some who are in crisis in our emergency department and others whose behaviors are intertwined with physical health conditions. The coronavirus pandemic has exacerbated children's behavioral health needs due to social isolation, disruption in routine, and resulting stress. We have seen first-hand in our hospital the toll the past year has taken on children's mental health and I wish to impress upon you that we are currently at a crisis level. We encourage state leaders to support the creation of a comprehensive, integrated and sustainable behavioral health ecosystem for all children that can be readily accessed when and how they need it.

Connecticut Children's is the largest provider of emergency behavioral health services for children in the state of Connecticut with over 3,000 visits in 2020. Depression and suicidal ideation (contemplating suicide or wanting to take one's own life), or threats of self-injury are the most common presenting problem. Recognizing the growing incidence of suicide, Connecticut Children's Emergency Department began screening all children starting at the age of 10 for risk of suicide, even for those who may be visiting us for a broken bone or a couple of stitches. In the first year, over 16,000 children were screened in the emergency room including those coming in for a medical condition. 16% of those children screened tested positive for risks of suicide. This does not include those children who are admitted each year with serious medical complications resulting from failed suicide attempts. We have found a disturbing trend in recent months. The rates of positive screens in October 2020 increased to 19%, November was 24% and December was 21%. We need to act now to better support the mental health of children in Connecticut.

Some of the provisions contained within Senate Bill 2, including establishing a suicide prevention program, mandating mental health training for certain medical professionals, and allowing minors greater access to therapy services are positive steps that have the potential to help children.

Schools are a trusted source of information for many families and as such, I applaud the intent of Section 15 which would require teachers to provide parents information concerning safety,

mental health and food insecurity resources, but would offer a few additional thoughts. I would encourage that any list of resources be specific to certain regions or communities, as we know that resources that are a far distance from a family's home is rarely a realistic treatment option for working families. Moreover, lists should be updated frequently. The more general the resources the less likely they will be effective. I would urge that effort be made to insure that resources be evidence-based, licensed and reputable so as not to risk presenting another dead-end to families struggling to help their children.

I am also pleased to see the suggestion that a task force be developed to study the comprehensive needs of children in our state. The COVID-19 pandemic has shown us that children are really struggling right now and need our support. While we have agencies and organizations in Connecticut dedicated to children, the charges of such organizations are often narrowly defined and thus, work can often be siloed. I would like to see this task force be an opportunity to think holistically about the needs of all children. Furthermore, the first tenet of the proposed task force is that "each student enters school healthy and learns about and practices a healthy lifestyle." I would hope that this includes mental health, as we know students cannot learn to their fullest potential if they are struggling with their emotional wellbeing. Should this bill pass, Connecticut Children's would be an eager partner in this effort and would be pleased to play a role on this task force.

Thank you for your consideration of our position. If you have any questions about this testimony, please contact Emily Boushee, Connecticut Children's Government Relations, at 860-837-5557.